

**Remarks**

Prior to examination of this application, please enter the preliminary amendments set forth above. Claim 1 has herein been canceled. New Claims 2-28 have been herein been added.

A credit card payment form is enclosed in payment of the \$384.00 fee for 3 independent claims in excess of three, and 7 claims in excess of twenty. The Commissioner is hereby authorized to charge any additional or deficient fees which may be required to Deposit Account No. 16-0657.

A postcard is enclosed evidencing receipt of the same.

Respectfully submitted,

**PATULA & ASSOCIATES, P.C.**



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